

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

09/787051

11 JUN 2001

APPLICANT(S)

Marking

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT											
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.			
1			/				51									
2				/			52									
3				/			53									
4				/			54									
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43							93									
44							94									
45							95									
46							96									
47							97									
48							98									
49							99									
50							100									
TOTAL IND.			2				TOTAL IND.									
TOTAL DEP.			18				TOTAL DEP.									
TOTAL CLAIMS			20				TOTAL CLAIMS									